Summary of Benefits Report for Colorado, CHIP InsureKidsNow.gov

es			
Is the service Covered?	Frequency	List any service -	specific limitations
Yes	2 x year		
Yes	2 x year		
Yes	1 x every 3 years	permanent molars only	
Yes	1 x lifetime	only for premature loss of deciduous permanent teeth; up to age 14.	
es		_	
Is the service Covered?	Frequency	List any service - specific limitations	Recommended age of first visit ?
Yes	2 x year		
Yes	2 x year		
No			
Yes	1 x year		
Yes	1 x every 5 years		
Yes			
S		_	
Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage
Yes			
Yes			
Yes		anterior teeth only	
	-		
Yes			
ntics)	T		1
Yes			
Yes			
Yes			
		•	
No			
No No			
	Is the service Covered? Yes Yes Yes Yes Is the service Covered? Yes No Yes Yes Yes Yes Yes Yes Yes Yes Yes Ye	Is the service Covered? Yes 2 x year Yes 2 x year Yes 1 x every 3 years Yes 1 x lifetime Is the service Covered? Yes 2 x year Yes 2 x year Yes 2 x year Yes 2 x year Yes 1 x every 5 years Yes 1 x every 5 years Yes	Is the service Covered? Yes 2 x year Yes 2 x year Yes 1 x every 3 years permanent molars onl Yes 1 x lifetime only for premature los permanent teeth; up to service Covered? Yes 2 x year Is the service Covered? Yes 2 x year Yes 2 x year Yes 1 x every 5 years Yes 1 x every 5 years Yes 5 x year Is the service Covered? Yes 1 x every 5 years Yes 7 x every 5 years Yes 9 x x every 5 years Yes 1 x every 5 years Yes 1 x every 5 years Yes 2 x year Ano Anterior teeth only Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes

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Treatment Services						
Treatment Service	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage		
Retainers (orthodontic)	No					
Braces	Yes		\$1,500 lifetime maximum	medically necessary only		
Oral surgery			•			
Simple extractions	Yes					
Surgical extractions	Yes		for wisdom teeth, decay or periocoronitis must be present			
Care of abscesses	Yes					
Cleft palate treatment	No					
Cancer treatment	No					
Treatment of fractures	No					
Biopsies	No					
Treatment of jaw joint problems (TMJ)	No					
Emergency room services provided by a dentist	Yes		services that are normally covered only	must be a CHP+ provider		
Inpatient Hospital Services	No					
Anesthesia						
General anesthesia	No					
Intravenous conscious sedation	No					
Non-intravenous conscious sedation	No					
Analgesia (nitrous oxide)	No					

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^{*} When this information is posted on the Insure Kids Now website, we will include a special note for orthodontic services explaining that parents and caretakers should work with their child's orthodontist to ensure that the treatment and payment terms and conditions are clear at the outset of treatment (for example, what happens in the case of a child who becomes ineligible for Medicaid or CHIP while he or she is undergoing orthodontic treatment?).